

ATTACHMENT A

MetaCyte's mission is to build life science companies. MetaCyte takes promising ideas, based on technologies developed by local scientists, researchers, or inventors, and develops the necessary strategies that will take these ideas to the marketplace. MetaCyte applies expertise and resources to transform these concepts and technologies into viable businesses.

MetaCyte partners with the entrepreneur and creates a joint agreement, with duties, responsibilities and ownership clearly defined from the outset. From the execution of that agreement, MetaCyte and the entrepreneur immediately launch into the key tasks to speed the new company to success. Some of these activities include:

- Incorporate the new company when appropriate
- Secure IP and or licensing terms
- Facilitate IT, HR, accounting and banking relationships
- Create a competitive, thorough business plan and financial model
- Refine market characterization and development
- Recruit relevant expert advisors and eventually company employees and or directors
- Identify potential strategic relationships – with an eye towards exit strategy
- Create a road map for regulatory-clinical milestones

MetaCyte's strategy for obtaining funding for life science companies involves tapping a growing list of public and private sources including individual and institutional investors and strategic partnerships. The team at MetaCyte has developed a network of regional and national life science and healthcare technology venture capital firms that represent a potential source of capital. In addition, MetaCyte is working closely with Kentucky Seed Capital LLC to help capitalize its companies.

MetaCyte's approach is robust and flexible. There is no "magic formula" for success. The goal is to maximize an opportunity's potential for success, driving life science research and healthcare technology to market.

CONTRACT DATA SHEETPSC Type (check one): ☐ New ☒ Renewal ☐ Addendum**Contractor Information**

1. Legal Name of Contractor: MetaCyte Business Lab LLC
2. Address: 201 E. Jefferson Street
3. City/ State & Zip: Louisville, KY 40202
4. Contact Person Name & Telephone Number: Steve Gailar (502)569-1020
5. Revenue Commission Taxpayer ID#:
6. If registration is not required please explain:
7. Is account in good standing: Yes
8. Federal Tax ID # (SSN if sole proprietor):

Department Information

9. Requesting Department: Cabinet for Community Development
10. Contact Person Name & Telephone: C. Bruce Traugher 574-6250

Contract Information

11. Not to exceed amount: \$400,000
12. Are expenses reimbursed? No
13. If yes list allowable expenses and maximum amount reimbursable:
14. Beginning and ending date of the contract: July 1, 2006 – June 30, 2007
15. Coding: 1101-501-0977-097701-521301
16. Scope & Purpose of the contract: Professional Services with respect to assisting in the development of high growth startup companies to the areas of life science research and healthcare technology

Authorizations

NSL County Attorney Review - Approved as to Form:

Department Director: C. Bruce Traugher Date: 7-3-06

Signature certifies:

☒ Funds are available

☒ Contractor is registered and in good standing with the Revenue Commission

☒ Human Relations Commission registration requirements have been met

Cph Risk Management Division of Finance - Certifies Insurance requirements satisfied: 7-3-06

Cabinet Secretary: C. Bruce Traugher Date: 7-3-06

(If applicable)

WRITTEN FINDINGS**EXPLAINING NECESSITY FOR USING NONCOMPETITIVE NEGOTIATION FOR PSC**

This document constitutes written request and findings, as required by KRS 45A.380 stating the need to purchase through noncompetitive negotiation for PSC Contract # N/A. By the signatures listed below, the Requesting Department has determined, and the Chief Financial Officer concurs, that competition is not feasible because:

_____ A. An emergency exists which will cause public harm as a result of the delay in competitive procedures. **** Mayors Approval required for emergency purchases exceeding \$10,000.**

_____ B. There is a single source within a reasonable geographic area of the supply or service to be procured or leased (attach sole source determination from the Purchasing Department).

X _____ C. The contract is for the services typically provided by a licensed professional, such as an attorney, architect, engineer, physician, certified public accountant, registered nurse, or educational specialist; a technician such as a plumber, electrician, carpenter, or mechanic; an artist such as a sculptor, aesthetic painter, or musician; or a non-licensed professional such as a consultant, public relations consultant, advertising consultant, developer, employment department, construction manager, investment advisor, or marketing expert and the like.

_____ D. The contract is for the purchase of perishable items purchased on a weekly basis, such as fresh fruits, vegetables, fish, or meat.

_____ E. The contract is for replacement parts where the need cannot reasonably be anticipated and stockpiling is not feasible.

_____ F. The contract is for proprietary items for resale.

_____ G. The contract or purchase is for expenditures made on authorized trips outside the boundaries of the city.

_____ H. The contract is for the purchase of supplies which are sold at public auction or by receiving sealed bids.

_____ I. The contract is for group life insurance, group health and accident insurance, group professional liability insurance, worker's compensation insurance, or unemployment liability insurance.

_____ J. The contract is for a sale of supplies at reduced prices that will afford a purchase at savings to the Metro Government.

_____ K. The contract was solicited by competitive sealed bidding and no bids were received from a responsive and responsible bidder.

_____ L. Where, after competitive sealed bidding, it is determined in writing that there is only one (1) responsive and responsible bidder.

N/A
Requesting Department Director _____ Date _____

C. Bruce Traughber 7-3-06
Cabinet Secretary _____ Date _____
(When required by cabinets policy)

N/A
**Mayor _____ Date _____

****Signature is required only for Written Finding A**